

## KNOW YOUR CLIENT (KYC) UPDATE FORM – NATURAL PERSON

### Investor Details

Surname		Title	
Full Name(s)		Client No.	
Residential Address			
Cell no			
E-mail Address			
Employment Type	<input type="checkbox"/> Minor	<input type="checkbox"/> Unemployed	
	<input type="checkbox"/> Salary Earner <sup>1</sup>	<sup>1</sup> Name of Employer	
		<sup>1</sup> Position at Workplace	
		<sup>1</sup> Work Industry	
	<input type="checkbox"/> Self Employed <sup>2</sup>	<sup>2</sup> Provide details of type and nature of business and business industry.	
<input type="checkbox"/> Pensioner <sup>3</sup>	<sup>3</sup> Name of Pension Fund		

### Source of Income

Please select and complete all the applicable Source of Income fields below.	
Source of Income Type	Amount (monthly)
<input type="checkbox"/> Salary	N\$
<input type="checkbox"/> Allowance	N\$
<input type="checkbox"/> Bonus/Incentives	N\$
<input type="checkbox"/> Business Income	N\$
<input type="checkbox"/> Pension	N\$
<input type="checkbox"/> Rental Income	N\$
<input type="checkbox"/> Dividends	N\$
<input type="checkbox"/> Investments	N\$
<input type="checkbox"/> Farming Activities	N\$
<input type="checkbox"/> Other <sup>4</sup>	N\$
<sup>4</sup> Please specify	
<b>Total Source of Income</b>	<b>N\$</b>

### Investor Declaration

<p>I, herewith declare that all information provided above by me is true and correct. I acknowledge that the Administrator (Capricorn Asset Management) may report any information provided by me to the Financial Intelligence Centre.</p> <p><b>Signature of Investor/Financial Advisor</b> _____ <b>Signed at</b> _____ <b>Date</b> _____</p>
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